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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for	Keith First name		Dawn First name
	example, your driver's license or passport).	Scott Middle name		Marie Middle name
	Bring your picture identification to your meeting with the trustee.	Bedford Last name and Suffix (Sr., Jr., II, III)	-	Bedford Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	<u> </u>		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8716		xxx-xx-7764

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Debtor 1 Keith Scott Bedford
Debtor 2 Dawn Marie Bedford

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	2215 Boyce Road Ottawa, IL 61350	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	La Salle				
	County		County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known)

Pari	t 2: Tell the Court About \	∕our Ban	kruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Cha	oter 7					
		☐ Cha	oter 11					
		☐ Cha	'					
		☐ Cha	'					
		·						
8.	How you will pay the fee	at or	out how yo	the entire fee when I file my petition. Please check with the clerk's office in your local court for more details a you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money our attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with the address.				
				eed to pay the fee in installments. If you choose this option, sign and attach the Application is e Filing Fee in Installments (Official Form 103A).				
		bı	ut is not rec oplies to yo	est that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that is to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out splication to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.				
9.	Have you filed for bankruptcy within the last 8 years?	No.						
		☐ Yes.						
			District		When	Case number		
			District	-	When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No.	Go to	line 12.				
	residence?	☐ Yes.	Has yo	our landlord obtained	d an eviction judgment agains	st you and do you want to stay in your resider	nce?	
				No. Go to line 12.				
				Yes. Fill out <i>Initial</i> bankruptcy petition		Judgment Against You (Form 101A) and file	it with this	

Debtor 1 Keith Scott Bedford

Debtor 2

Dawn Marie Bedford

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Deb	otor 2 Dawn Marie Bedfo	ord			Case number (if known)
Par	Report About Any Bu	ısinesses	You Own	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Check	the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	9
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	dicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	· Have Any	/ Hazardo	us Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is	_			
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?	
	public health or safety?				
	Or do you own any property that needs immediate attention?			ate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number Chart City Chat & 7% Code
					Number, Street, City, State & Zip Code

Debtor 1

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Debtor 1 Keith Scott Bedford

Debtor 2 Dawn Marie Bedford Case number (if known)

Part 5: E

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-12818 Doc 1 Filed 04/14/16 Entered 04/14/16 21:06:49 Desc Main Document Page 6 of 58

	otor 1 otor 2	Keith Scott Bedford Dawn Marie Bedford		Document	. age e e.	Case number (if known)		
Pari	t 6:	Answer These Questi	ons for R	eporting Purposes					
	Wha	t kind of debts do	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
	-			☐ No. Go to line 16b.	•				
				Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
				☐ No. Go to line 16c.					
				☐ Yes. Go to line 17.					
			16c.	State the type of debts you owe th	at are not consum	er debts or business of	debts		
17.		ou filing under oter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and admin are paid that funds will be available to distribute to unsecured creditors? No Yes	ty is excluded and administrative expenses							
			■ No						
			☐ Yes						
18.		How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000		1 25,001-50,000		
			□ 50-99 □ 100-199		☐ 5001-10,000 ☐ 10,001-25,00	n	☐ 50,001-100,000 ☐ More than100,000		
			☐ 200-9		10,001 20,00	•	in More diaminos,000		
19.	How	ow much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion		
		nate your assets to orth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$100,000,001		☐ More than \$50 billion		
20.		much do you nate your liabilities	□ \$0 - \$		□ \$1,000,001 -		□ \$500,000,001 - \$1 billion		
	to be	•	_ ` `	01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
				001 - \$500,000 001 - \$1 million	□ \$100,000,001		☐ More than \$50 billion		
Part	t 7:	Sign Below							
For	you		I have ex	amined this petition, and I declare u	under penalty of pe	erjury that the informa	tion provided is true and correct.		
				chosen to file under Chapter 7, I am ates Code. I understand the relief a			nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.		
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					n attorney to help me fill out this				
			I request	relief in accordance with the chapte	er of title 11, United	d States Code, specifi	ed in this petition.		
				cy case can result in fines up to \$25			property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			/s/ Keith	n Scott Bedford		/s/ Dawn Marie Be			
				cott Bedford e of Debtor 1		Dawn Marie Bedfo Signature of Debtor 2			
			Executed	April 14, 2016 MM / DD / YYYY		Executed on April MM / I	14, 2016 DD / YYYY		

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Debtor 1 Debtor 2	Keith Scott Bedfor Dawn Marie Bedfo		Page 7 of 58 Case number (if known)		
•	attorney, if you are ed by one	under Chapter 7, 11, 12, or 13 of title 11, Uni	ted States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)	
	not represented by ey, you do not need page.			wledge after an inquiry that the information in the	
		/s/ Christina Banyon Signature of Attorney for Debtor	Date	April 14, 2016 MM / DD / YYYY	
		Christina Banyon Printed name			
		Banyon & Scheinbaum, LLC Firm name			
		3077 West Jefferson Street Suite 107 Joliet, IL 60435 Number, Street, City, State & ZIP Code			

Email address

Contact phone

6283282Bar number & State

cbanyon.law@gmail.com

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		1 (1(1), () () () ()	
mation to identify your	case:		
Keith Scott Bedfo	ord		
First Name	Middle Name	Last Name	
Dawn Marie Bedf	ord		
First Name	Middle Name	Last Name	
inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Keith Scott Bedfor First Name Dawn Marie Bedfor First Name	Keith Scott Bedford First Name Middle Name Dawn Marie Bedford First Name Middle Name	Keith Scott Bedford First Name Middle Name Last Name Dawn Marie Bedford First Name Middle Name Last Name

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a Value of	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	75,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	21,360.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	96,360.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	91,121.02
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	41,348.83
	Your total liabilities	\$	132,469.85
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,391.10
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,359.32
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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		Document	Page 9 of 58	
	Keith Scott Bedford		9	
Debtor 2	Dawn Marie Bedford		Case number (if known)	

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,689.76

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Ca	se 16-12818 Doc 1	Filed 04/14/16 Document	Entered 04/14/16 Page 10 of 58	5 21:06:49	Desc	Main
Fill	in this inform	nation to identify your case and th					
Deb	otor 1	Keith Scott Bedford First Name Middle	e Name	Last Name			
	otor 2 use, if filing)	Dawn Marie Bedford First Name Middle	e Name	Last Name			
Uni	ted States Bar	nkruptcy Court for the: NORTHER	N DISTRICT OF ILLI	NOIS			
Cas	se number			_			Check if this is an amended filing
_		rm 106A/B e A/B: Property					12/15
n ea hink nfor Ansv	ch category, se tit fits best. Be mation. If more ver every quest	eparately list and describe items. List e as complete and accurate as possib space is needed, attach a separate s	le. If two married people heet to this form. On th	e are filing together, both are e e top of any additional pages,	qually responsible	e for suppl	ying correct
	I No. Go to Part						
1.1	2215 Boyc	a Diaca	What is the property				
		f available, or other description	□ ·	home Iti-unit building n or cooperative	the amount of any	secured cl	s or exemptions. Put aims on <i>Schedule D:</i> Secured by Property.
	Ottawa	IL 61350-0000	Land	l or mobile home	Current value of entire property?	p	Current value of the ortion you own?
	City	State ZIP Code	Investment pr Timeshare Other Who has an interes: Debtor 1 only	t in the property? Check one		ure of your ple, tenanc	\$75,000.00 cownership interest by by the entireties, or
	La Salle		Debtor 2 only				
	County		Debtor 1 and At least one o Other information y	Debtor 2 only of the debtors and another ou wish to add about this item	(see instruction		nity property
				ou wish to add about this item	`	5)	

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$75,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 16-12818 Doc 1 Filed 04/14/16 Entered 04/14/16 21:06:49 Desc Main Document Page 11 of 58 Debtor 1 **Keith Scott Bedford Dawn Marie Bedford** Debtor 2 Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Ford Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Fusion** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2013 Debtor 2 only Current value of the Current value of the 35,000 (est.) Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? Other information: At least one of the debtors and another \$14,275.00 \$14,275.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Ford** Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: F-150 Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2003 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 175,000 (est.) entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$3,225.00 \$3,225.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$17,500.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$1,000.00 Misc. Household Goods and Furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

☐ Yes. Describe.....

Case 16-12818 Doc 1 Filed 04/14/16 Entered 04/14/16 21:06:49 Desc Main Page 12 of 58 Document Debtor 1 **Keith Scott Bedford Dawn Marie Bedford** Debtor 2 Case number (if known) 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... Variety of Guns \$900.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$900.00 Personal Used Clothing of Debtor 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$1,000.00 Wedding Bands 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No Yes. Describe..... \$10.00 Pet Dog 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No \square Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,810.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar

institutions. If you have multiple accounts with the same institution, list each.

Institution name:

■ Yes.....

Case 16-12818 Doc 1 Filed 04/14/16 Entered 04/14/16 21:06:49 Desc Main Document Page 13 of 58 Debtor 1 Keith Scott Bedford **Dawn Marie Bedford** Debtor 2 Case number (if known) Old Second Bank Checking Account \$20.00 17 1 **Heartland Bank Checking Account** \$30.00 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured

	Case 16-12818	Doc 1	Filed 04/14/16 Document	Entered 04/14/16 21:06:49 Page 14 of 58	Desc Main
Debtor 1 Debtor 2	Keith Scott Bedford Dawn Marie Bedford		Document	Case number (if known)	
					claims or exemptions.
28. Tax ref ■ No	unds owed to you				
☐ Yes.	Give specific information ab	out them, inc	cluding whether you alre	ady filed the returns and the tax years	
29. Family <i>Examp</i>		alimony, spo	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
■ No □ Yes.	Give specific information				
	amounts someone owes y oles: Unpaid wages, disabili benefits; unpaid loans	ty insurance p		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
■ No □ Yes.	Give specific information				
	ts in insurance policies bles: Health, disability, or life	e insurance; h	nealth savings account (HSA); credit, homeowner's, or renter's insural	nce
	Name the insurance compa	any of each n	olicy and list its value		
– 163.		pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
	(Koł		Through Employer		\$0.00
	140 (Jasii Value			
If you a	terest in property that is defended in property that is defended in the has died.			ed surance policy, or are currently entitled to rec	eive property because
■ No □ Yes.	Give specific information				
Examp	against third parties, who			it or made a demand for payment to sue	
■ No □ Yes.	Describe each claim				
34. Other o ■ No	contingent and unliquidate	ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
☐ Yes.	Describe each claim				
35. Any fin ■ No	ancial assets you did not	already list			
☐ Yes.	Give specific information				
				ny entries for pages you have attached	\$50.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

Case 16-12818 Doc 1 Filed 04/14/16 Entered 04/14/16 21:06:49 Desc Main Page 15 of 58 Document Debtor 1 **Keith Scott Bedford** Debtor 2 **Dawn Marie Bedford** Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$75,000.00 Part 2: Total vehicles, line 5 \$17,500.00 57. Part 3: Total personal and household items, line 15 \$3,810.00 58. Part 4: Total financial assets, line 36 \$50.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Copy personal property total Total personal property. Add lines 56 through 61... \$21,360.00 \$21,360.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$96,360.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Keith Scott Bedfo	ord		
	First Name	Middle Name	Last Name	
Debtor 2	Dawn Marie Bedf	ord		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	you claiming?	Check one only	even if	your spouse is filin	g with y	ou.
----	-----------------------------	---------------	----------------	---------	----------------------	------------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

nount of the exemption you claim Specific laws that allow exemption
neck only one box for each exemption.
\$30,000.00 735 ILCS 5/12-901
100% of fair market value, up to any applicable statutory limit
\$5,000.00 735 ILCS 5/12-1001(b)
100% of fair market value, up to any applicable statutory limit
\$2,400.00 735 ILCS 5/12-1001(c)
100% of fair market value, up to any applicable statutory limit
\$2,400.00 735 ILCS 5/12-1001(c)
100% of fair market value, up to any applicable statutory limit
\$1,000.00 735 ILCS 5/12-1001(b)

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Keith Scott Bedford

De	ebtor 2 Dawn Marie Bedford			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Variety of Guns Line from Schedule A/B: 10.1	\$900.00		\$900.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	Personal Used Clothing of Debtor Line from Schedule A/B: 11.1	\$900.00		\$900.00	735 ILCS 5/12-1001(a)
	Line from Genedate Add.			100% of fair market value, up to any applicable statutory limit	
	Wedding Bands Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
	Line IIoiii Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit	
	Old Second Bank Checking Account Line from Schedule A/B: 17.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
	Line IIoiii Schedule A/D. 17.1			100% of fair market value, up to any applicable statutory limit	
	Heartland Bank Checking Account Line from Schedule A/B: 17.2	\$30.00		\$30.00	735 ILCS 5/12-1001(b)
	Line IIoiii Schedule AVD. 11.2			100% of fair market value, up to any applicable statutory limit	
	Life Insurance Through Employer (Kohls)	\$0.00		\$0.00	215 ILCS 5/238
	No Cash Value Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmer	nt.)
	■ No				
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	□ Voc				

Debtor 1

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		Document	Page 18	3 of 58		
Filli	in this information to identify y	your case:				
Deb	tor 1 Keith Scott B	Rodford				
Deb	First Name	Middle Name	Last Name			
Deb	tor 2 Dawn Marie E	Bedford				
	use if, filing) First Name	Middle Name	Last Name			
1.1	and Charles Damilion into a Count for the	NODTHERN DISTRICT OF HI	LINOIC			
Unite	ed States Bankruptcy Court for t	the: NORTHERN DISTRICT OF ILI	LINOIS			
Case	e number					
(if kno					☐ Check	if this is an
					ameno	led filing
						_
<u>Offi</u>	cial Form 106D					
Scl	hedule D: Credito	rs Who Have Claims	Secured	d by Propert	V	12/15
	ricadic B. Crearte	13 Who have olaims	<u> </u>	a by i ropert	<u> </u>	12/10
		ble. If two married people are filing togeth				
	eded, copy the Additional Page, fil per (if known).	I it out, number the entries, and attach it	to this form. Or	n the top of any addition	nai pages, write your na	me and case
	any creditors have claims secure	d by your property?				
		nit this form to the court with your other	r schodulos V	ou have nothing also t	a rapart on this form	
	_	·	scriedules. To	ou nave nouning else t	o report on this form.	
'	Yes. Fill in all of the information	on below.				
Part	1: List All Secured Claims					
2. Lis	st all secured claims. If a creditor h	has more than one secured claim, list the cre	editor separately	Column A	Column B	Column C
for ea	ach claim. If more than one creditor	has a particular claim, list the other creditor	rs in Part 2. As	Amount of claim	Value of collateral	Unsecured
much	n as possible, list the claims in alphal	betical order according to the creditor's nan	ne.	Do not deduct the value of collateral.	that supports this claim	portion If any
	Streator Onized Credit			value of collateral.		ii diiy
2.1	Union	Describe the property that secures	the claim:	\$19,847.38	\$14,275.00	\$5,572.38
	Creditor's Name	2013 Ford Fusion 35,000 (es	st.) miles			
		As of the date you file, the claim is:	Charle all that			
	120 E. Northpoint	apply.	Check all that			
	Streator, IL 61364	_ Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.				
■ D	ebtor 1 only	☐ An agreement you made (such as	mortgage or sec	cured		
	ebtor 2 only	car loan)				
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
ПΑ	t least one of the debtors and anothe	er				
□с	check if this claim relates to a	Other (including a right to offset)	Purchase N	Money Security		
•	community debt					
Date	debt was incurred	Last 4 digits of account num	ber 03			
	Streator Onized Credit					
2.2	Union	Describe the property that secures	the claim:	\$2,904.04	\$3,225.00	\$0.00
	Creditor's Name	2003 Ford F-150 175,000 (es				
			,			
	120 E. Northpoint	As of the date you file, the claim is: apply.	Check all that			
	Streator, IL 61364	☐ Contingent				
	Number, Street, City, State & Zip Code	Unliquidated				
		☐ Disputed				
Who	owes the debt? Check one.	Nature of lien. Check all that apply.				
\square D	ebtor 1 only	☐ An agreement you made (such as	mortgage or sec	cured		
■ D	Debtor 2 only	car loan)				
_	Pebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
_	t least one of the debtors and another		,			
	check if this claim relates to a	Other (including a right to offeet)	Purchase N	Money Security		

community debt

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Debtor	1 Keith Scott Bedfor	rd	(Case number (if know)		
		Middle Name Last Name				
Debtor	2 Dawn Marie Bedfor	rd				
	First Name M	Middle Name Last Name				
Date de	bt was incurred	Last 4 digits of account no	umber 69			
Z.3	/ells Fargo Home lortgage	Describe the property that secur	es the claim:	\$68,369.60	\$75,000.00	\$0.00
Cr	editor's Name	2215 Boyce Place Ottawa La Salle County	, IL 61350			
-	O Box 10335 es Moines, IA 50306	As of the date you file, the claim apply. Contingent	is: Check all that			
Nu	umber, Street, City, State & Zip Cod					
Who ov	ves the debt? Check one.	☐ Disputed Nature of lien. Check all that app	ly.			
	or 1 only or 2 only	☐ An agreement you made (such car loan)	as mortgage or sec	ured		
■ Debt	or 1 and Debtor 2 only	☐ Statutory lien (such as tax lien,	mechanic's lien)			
☐ At lea	ast one of the debtors and an	other				
	ck if this claim relates to a number in the community debt	Other (including a right to offset	First Mortga	age		
Date de	bt was incurred	Last 4 digits of account no	Unkno umber this tin			
	· · · · · · · · · · · · · · · · · · ·	es in Column A on this page. Write that n m, add the dollar value totals from all pag		\$91,121.0		
	that number here:	, and and donar raido totalo nom an pag	 -	\$91,121.0)2	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in this inf		Document Page 2	0 of 58	
	formation to identify your case		W 01 30	
Debtor 1	Keith Scott Bedford			
	First Name	Middle Name Last Name		
Debtor 2	Dawn Marie Bedford			
(Spouse if, filing)	First Name	Middle Name Last Name		
Jnited States	Bankruptcy Court for the: NC	PRTHERN DISTRICT OF ILLINOIS		
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 106E/F			
		Have Unsecured Claims		12/15
chedule G: Ex schedule D: Creeft. Attach the ame and case	secutory Contracts and Unexpired I editors Who Have Claims Secured Continuation Page to this page. If y number (if known).	could result in a claim. Also list executory _eases (Official Form 106G). Do not include by Property. If more space is needed, copy /ou have no information to report in a Part,	any creditors with partially secured of the Part you need, fill it out, number t	laims that are listed in the entries in the boxes on the
	st All of Your PRIORITY Unsecu			
_	editors have priority unsecured clai	ims against you?		
No. Go	to Part 2.			
_				
☐ Yes.	All CV NONDDIGDITY!			
Part 2: Lis	st All of Your NONPRIORITY Ur			
Part 2: Lis	editors have nonpriority unsecured	claims against you?		
Part 2: Lis	editors have nonpriority unsecured		edules.	
Part 2: Lis	editors have nonpriority unsecured	claims against you?	nedules.	
Part 2: Lis 3. Do any cre No. You Yes. 4. List all of yunsecured	editors have nonpriority unsecured u have nothing to report in this part. S your nonpriority unsecured claims claim, list the creditor separately for e	claims against you?	o holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea	ady included in Part 1. If more
Part 2: Lis 3. Do any cre No. You Yes. 4. List all of y unsecured than one cr	editors have nonpriority unsecured u have nothing to report in this part. S your nonpriority unsecured claims claim, list the creditor separately for e	claims against you? ubmit this form to the court with your other sch in the alphabetical order of the creditor wheach claim. For each claim listed, identify what	o holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea	ady included in Part 1. If more
Part 2: Lis 3. Do any cre No. You Yes. 4. List all of y unsecured than one cr Part 2.	editors have nonpriority unsecured unhave nothing to report in this part. Secured vour nonpriority unsecured claims claim, list the creditor separately for expeditor holds a particular claim, list the	claims against you? ubmit this form to the court with your other sch in the alphabetical order of the creditor wheach claim. For each claim listed, identify what	o holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea	ady included in Part 1. If more out the Continuation Page of
Part 2: Lis 3. Do any cre No. You Yes. 4. List all of yunsecured than one created than one created. AFNI Nonpri	where the properties of the part of the pa	claims against you? ubmit this form to the court with your other sch in the alphabetical order of the creditor wh each claim. For each claim listed, identify what to other creditors in Part 3.If you have more than Last 4 digits of account number	o holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea n three nonpriority unsecured claims fill o	ady included in Part 1. If more out the Continuation Page of Total claim
Part 2: Lis 3. Do any cre No. You Yes. 4. List all of y unsecured than one cr Part 2. 4.1 AFNI Nonpr PO E	your nonpriority unsecured claims claim, list the creditor holds a particular claim, list the freditor separately for ereditor holds a particular claim, list the liority Creditor's Name 3ox 3510	claims against you? ubmit this form to the court with your other sch in the alphabetical order of the creditor wh each claim. For each claim listed, identify what e other creditors in Part 3.If you have more than	o holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea n three nonpriority unsecured claims fill o	ady included in Part 1. If more out the Continuation Page of Total claim
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Part 2: Lis 3. Do any cre No. You Yes. 4. List all of y unsecured than one cr Part 2. 4.1 AFNI Nonpr PO E Bloo Numbu Who i De De At	your nonpriority unsecured claims claim, list the creditor separately for ereditor holds a particular claim, list the creditor separately for ereditor holds a particular claim, list the seriority Creditor's Name Box 3510 emington, IL 61702 er Street City State Zlp Code incurred the debt? Check one. Sebtor 1 only sebtor 2 only sebtor 1 and Debtor 2 only seat one of the debtors and another	ubmit this form to the court with your other sch in the alphabetical order of the creditor wh each claim. For each claim listed, identify what to other creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure	o holds each claim. If a creditor has me type of claim it is. Do not list claims alrean three nonpriority unsecured claims fill of 0554 is: Check all that apply	ady included in Part 1. If more out the Continuation Page of Total claim
Part 2: Lis 3. Do any cre No. You Yes. 4. List all of y unsecured than one cr Part 2. 4.1 AFNI Nonpr PO E Bloo Numbu Who i De At Ch	your nonpriority unsecured claims claim, list the creditor separately for ereditor holds a particular claim, list the creditor separately for ereditor holds a particular claim, list the district Creditor's Name 3ox 3510 per Street City State Zlp Code incurred the debt? Check one.	claims against you? ubmit this form to the court with your other sch in the alphabetical order of the creditor wh each claim. For each claim listed, identify what to other creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure y	o holds each claim. If a creditor has me type of claim it is. Do not list claims alrea in three nonpriority unsecured claims fill of 0554 is: Check all that apply	ady included in Part 1. If more out the Continuation Page of Total claim \$10.06
Part 2: Lis 3. Do any cre No. You Yes. 4. List all of y unsecured than one cr Part 2. 4.1 AFNI Nonpr PO B Bloo Numbo Who i De At Ch debt	your nonpriority unsecured claims claim, list the creditor separately for ereditor holds a particular claim, list the creditor separately for ereditor holds a particular claim, list the seriority Creditor's Name Box 3510 emington, IL 61702 er Street City State Zlp Code incurred the debt? Check one. Sebtor 1 only sebtor 2 only sebtor 1 and Debtor 2 only seat one of the debtors and another	claims against you? ubmit this form to the court with your other sch in the alphabetical order of the creditor wh each claim. For each claim listed, identify what to other creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure y	o holds each claim. If a creditor has me type of claim it is. Do not list claims alrean three nonpriority unsecured claims fill of 0554 is: Check all that apply	ady included in Part 1. If more put the Continuation Page of Total claim \$10.06
Part 2: Lis 3. Do any cre No. You Yes. 4. List all of y unsecured than one cr Part 2. 4.1 AFNI Nonpr PO B Bloo Numbo Who i De At Ch debt	your nonpriority unsecured claims claim, list the creditor separately for ereditor holds a particular claim, list the creditor separately for ereditor holds a particular claim, list the service of the control of the	ubmit this form to the court with your other sch in the alphabetical order of the creditor wh each claim. For each claim listed, identify what to other creditors in Part 3.If you have more than Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure y Student loans Obligations arising out of a sep	o holds each claim. If a creditor has me type of claim it is. Do not list claims alrea in three nonpriority unsecured claims fill of 0554 is: Check all that apply	Total claim \$10.06

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Debtor 1 Keith Scott Bedford

Debto	or 2 Dawn Marie Bedford	Case number (if know)	
4.2	AFNI, Inc.	Last 4 digits of account number	\$40.57
	Nonpriority Creditor's Name PO Box 3517 Placemington III 64703	When was the debt incurred?	
	Bloomington, IL 61702 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	
4.3	AFNI, Inc.	Last 4 digits of account number 0503	\$79.00
	Nonpriority Creditor's Name PO Box 3517 Bloomington, IL 61702	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify Collection	
4.4	Arturo Tomas	Last 4 digits of account number 3322	\$51.66
	Nonpriority Creditor's Name PO Box 732 Ottawa, IL 61350	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	

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Debtor 1 Keith Scott Bedford

Debto	r 2 Dawn Marie Bedford	Case number (if know)	
4.5	Capital One	Last 4 digits of account number 1312	\$732.66
	Nonpriority Creditor's Name PO Box 6492	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.6	Capital One	Last 4 digits of account number 0709	\$5,189.85
	Nonpriority Creditor's Name PO Box 6492 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Credit Card	
		' '	
4.7	Capital One Retail Services Nonpriority Creditor's Name	Last 4 digits of account number 6004	\$1,997.73
	PO Box 71106 Charlotte, NC 28272	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	
		• • •	

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Debto	Dawn Marie Bedford	Case number (if know)	
4.8	Convergent Healthcare Nonpriority Creditor's Name	Last 4 digits of account number	\$36.83
	PO Box 5435 Dept 102	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	<u> </u>	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other Specify Medical	
	Li res	Other. Specify	
4.9	Convergent Healthcare Nonpriority Creditor's Name	Last 4 digits of account number 2716	\$130.91
	PO Box 5435 Dept 102	When was the debt incurred?	
	Carol Stream, IL 60197	_	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only		
	Debtor 2 only	☐ Contingent	
	<u> </u>	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1	Convergent Healthcare	Last 4 digits of account number 2618	\$110.00
0	Nonpriority Creditor's Name	Last 4 digits of account number	
	PO Box 5435 Dept 102	When was the debt incurred?	
	Carol Stream, IL 60197	As of the date you file the plain in Check all that apply	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	

Debtor 1 Keith Scott Bedford

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Debtor 2	Keith Scott Bedford Dawn Marie Bedford		Case number (if know)	
1	CubCadet	Last 4 digits of account number	6302	\$961.97
	Nonpriority Creditor's Name P.O. Box 368022 Strongsville, OH 44136	When was the debt incurred?		
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
2	Dr. David McFadden	Last 4 digits of account number	unknown	\$132.22
	Nonpriority Creditor's Name 1401 Lakewood Dr. # D	When was the debt incurred?		
	Morris, IL 60450 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical De	bt	
	EOS CCA Nonpriority Creditor's Name	Last 4 digits of account number	1719	\$462.53
	PO Box 981002 Boston, MA 02298	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	L. L. C.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure Student loans	o ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes	■ Other. Specify Credit Card		
		— Officer, Specify	-	

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Debtor 1 Debtor 2	Keith Scott Bedford Dawn Marie Bedford		Case number (if know)	
	Epic Group	Last 4 digits of account number	5612	\$286.36
	Nonpriority Creditor's Name PO Box 88087	When was the debt incurred?		
	Chicago, IL 60680 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	7.6 or and date you me, are claim.	o. Oncok all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify Collection		
5	Ford Service Card Nonpriority Creditor's Name	Last 4 digits of account number	6035	\$187.71
	Nonpriority Creditor's Name PO Box 9001006 Louisville, KY 40290	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Grundy Radiologists	Last 4 digits of account number	9364	\$52.20
	Nonpriority Creditor's Name PO Box 3273	When was the debt incurred?		
	Indianapolis, IN 46206 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	7.6 or and date you me, are claim.	o. Chook all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	\square Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify Medical		

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Debtor Debtor	1 Keith Scott Bedford 2 Dawn Marie Bedford		Case number (if know)	
4.1	Healthcare Centers of Morris Hospit Nonpriority Creditor's Name 25259 Reed Street Channahon, IL 60410	Last 4 digits of account number When was the debt incurred?	3377	\$11.11
	Number Street Ćity State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not	
	■ No □ Yes	Other. Specify Medical	g pians, and other similar debts	
4.1	Healthcare Midwest Nonpriority Creditor's Name	Last 4 digits of account number	unknown	Unknown
	5405 N. Knoxville Peoria, IL 61614	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separations.	d claim: aration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1 9	Heights Finance Corp. Nonpriority Creditor's Name	Last 4 digits of account number	1027	\$3,978.00
	1128 Columbus Street Ottawa, IL 61350 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	d aleim.	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	•	
	☐ Yes	Other. Specify Personal L	Udii	

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Debtor 1 Debtor 2	Keith Scott Bedford Dawn Marie Bedford	Case number (if know)	
4.2	Kohls	Last 4 digits of account number 3898	\$1,402.00
I	Nonpriority Creditor's Name PO Box 3115 Milwaukee, WI 53201	When was the debt incurred?	
1	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
I	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
ı	s the claim subject to offset?	report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
	Liberty Medical Center Nonpriority Creditor's Name	Last 4 digits of account number	\$45.18
:	827 E. Norris Dr. Ottawa, IL 61350	When was the debt incurred?	
ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
l	Debtor 2 only	☐ Unliquidated	
I	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2	Mega Group/Synchrony	Last 4 digits of account number 3068	\$3,425.00
I	Nonpriority Creditor's Name PO Box 105972	When was the debt incurred?	
	Atlanta, GA 30348 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
1	Debtor 1 only	☐ Contingent	
ļ	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
•	debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
1	□Yes	Other. Specify Credit Card	

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Debtor 1 Debtor 2	Keith Scott Bedford Dawn Marie Bedford		Case number (if know)	
	Morris Hospital	Last 4 digits of account number	5331	\$300.00
	Nonpriority Creditor's Name 150 West High Street Morris, IL 60450	When was the debt incurred?		
ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
l	Debtor 1 only	☐ Contingent		
I	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
ļ	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
l	Yes	Other. Specify Medical		
	Morris Hospital	Last 4 digits of account number	7531	\$2,020.20
	Nonpriority Creditor's Name Business Office 150 West High Street Morris, IL 60450	When was the debt incurred?		
Ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
1	Debtor 1 only	☐ Contingent		
1	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
1	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
1	No	Debts to pension or profit-sharing	g plans, and other similar debts	
I	Yes	Other. Specify Medical		
9	One Main Financial Nonpriority Creditor's Name	Last 4 digits of account number	6713	\$5,845.39
1	PO Box 183172 Columbus, OH 43218	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
'	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
1	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
ı	debt s the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify Credit Card	<u> </u>	

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Debtor Debtor	1 Keith Scott Bedford2 Dawn Marie Bedford	Case number (if know)	
4.2	OSF Healthcare	Last 4 digits of account number 2469	\$916.25
0	Nonpriority Creditor's Name 7978 Solution Center Chicago, IL 60677	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorseport as priority claims	orce that you did not
	■ No	Debts to pension or profit-sharing plans, and other similar	r debts
	Yes	Other. Specify Medical	
4.2	OSF Healthcare Nonpriority Creditor's Name	Last 4 digits of account number 2816	\$1,295.86
	7978 Solution Center Chicago, IL 60677	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorseport as priority claims	•
	■ No	Debts to pension or profit-sharing plans, and other simila	r debts
	Yes	Other. Specify Medical	
4.2	OSF Healthcare	Last 4 digits of account number 2623	\$2,589.99
	Nonpriority Creditor's Name 7978 Solution Center Chicago, IL 60677	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divoreport as priority claims	orce that you did not
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar	r debts
	Yes	Other. Specify Medical	

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Debtor Debtor	1 Keith Scott Bedford2 Dawn Marie Bedford	Case nun	nber (if know)	
4.2	OSF Healthcare	Last 4 digits of account number 2949		\$240.19
9	Nonpriority Creditor's Name 7978 Solution Center Chicago, IL 60677	When was the debt incurred?		<u> </u>
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check al	I that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agree report as priority claims	ement or divorce that you did not	
	■ No	Debts to pension or profit-sharing plans, and	d other similar debts	
	☐ Yes	Other. Specify Medical		
4.3	OSF Healthcare System Nonpriority Creditor's Name	Last 4 digits of account number 2730		\$115.71
	7978 Solution Center Chicago, IL 60677	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check al	I that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agree report as priority claims	•	
	No	Debts to pension or profit-sharing plans, and	d other similar debts	
	Yes	Other. Specify Medical		
4.3	OSF Medical Group	Last 4 digits of account number 5066		\$305.81
	Nonpriority Creditor's Name PO Box 91011	When was the debt incurred?		
	Chicago, IL 60680 Number Street City State Zlp Code	As of the date you file, the claim is: Check al	I that apply	
	Who incurred the debt? Check one.	,		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agree report as priority claims	ement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing plans, and	d other similar debts	
	Yes	Other. Specify Medical		

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Debtor 1 Keith Scott Bedford

otor 2 Dawn Marie Bedford	Case number (if know)	
Synchrony Bank	Last 4 digits of account number 3068	\$3,352.00
Nonpriority Creditor's Name P.O. Box 105972 Atlanta, GA 30348	When was the debt incurred?	, , , , , , , , , , , , , , , , , , ,
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	
T-H Professional Collections	Last 4 digits of account number	\$282.24
Nonpriority Creditor's Name PO Box 10166 Peoria, IL 61612	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Collection	
Tower Loans	Last 4 digits of account number Unknown	\$1,335.35
Nonpriority Creditor's Name 7501 N. University St.	When was the debt incurred?	
Suite 101 Peoria, IL 61614		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Personal Loan	

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Debtor 2	Keith Scott Bedford Dawn Marie Bedford	Case number (if know)	
	Transworld Systems Nonpriority Creditor's Name	Last 4 digits of account number J155	\$257.01
	PO Box 17205 Wilmington, DE 19850	When was the debt incurred?	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection for Nicor	
	Walmart / Synchrony Bank	Last 4 digits of account number 6032	\$184.19
	Nonpriority Creditor's Name PO Box 530927 Atlanta, GA 30353	When was the debt incurred?	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
	Walmart Master Card	Last 4 digits of account number 5239	\$1,183.35
	Nonpriority Creditor's Name PO Box 960024	When was the debt incurred?	
	Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, a control and journey, and comment of control and the profit	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	

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Debtor 1 Keith Scott Bedford

2 Dawn Marie Bedford		Case number (if know)	
Zales	Last 4 digits of account number	6035	\$1,801
Nonpriority Creditor's Name	- When we do do do his owned 2		
PO Box 9001006 Louisville, KY 40290	When was the debt incurred?		
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	-	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Consumer		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	C.f	Otrological	C.f	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 41,348.83
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 41,348.83

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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			<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Keith Scott Bedfo	ord		
	First Name	Middle Name	Last Name	
Debtor 2 Dawn Marie Bedford				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5)		0.0.0	2 0000	
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Docume	ent Page 35 o	<u>f 58</u>	
Fill in this	information to identify your	case:			
Debtor 1	Keith Scott Bedfe	ord			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	Dawn Marie Bedf	ord Middle Name	Last Name		
	3,				
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	oer				
(if known)				☐ Check if this is an amended filing	
				amended ming	
Official	Form 106H				
Sched	ule H: Your Cod	ebtors		12/15	
					_
	and case number (if known) you have any codebtors? (If			as a codebtor.	
■ No □ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana			(Community property states and territories include ngton, and Wisconsin.)	
.					
	Go to line 3. Did your spouse, former spo	use or logal equivalent liv	o with you at the time?		
Li res.	. Dia your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line Form 1 out Co	2 again as a codebtor only i 106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor	f that person is a guarar I Form 106E/F), or Sched	ntor or cosigner. Make s	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic 6G). Use Schedule D, Schedule E/F, or Schedule G to **Column 2: The creditor to whom you owe the deb	ial fill
N	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
1	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
(City	State	ZIP Code		
2.0				Cabadida D. Kas	_
3.2	Name			_ □ Schedule D, line □ Schedule E/F, line	
				☐ Schedule E/F, line	
_	Number Street			-	
	City	State	ZIP Code		

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Fill	in this information to identify your						ı			
		Keith Scott Bedford								
	Debtor 2 Spouse, if filing) Dawn Marie Bedford					_				
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILL	INOIS		_				
(If kr	fficial Form 106I		-					ed filing ent show as of the	ving postpetition of following date:	chapter
S	chedule I: Your Inc	ome								12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and yo ch a separate sheet to this form. Describe Employment	are married and not filing ware spouse is not filing ware. On the top of any additi	ng jointly ith you, d	, and your sp o not include	ouse i infori	s liv natio	ing with you, inc	lude info ouse. If I	ormation about y	our eeded,
1.	Fill in your employment information.		Debtor	Debtor 1			Debtor	Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employment status Employed Not employed			_ '	■ Employed□ Not employed			
		Occupation	Fabricator			Materi	Material Handler			
	Include part-time, seasonal, or self-employed work.	Employer's name	name Colonial Kitchen and Bath			Kohls	Kohls			
	Occupation may include student or homemaker, if it applies.					Ottawa				
		How long employed t	here?	3 years				5.5 year	rs	
Pai	Give Details About Mo	nthly Income								
Esti spoi	mate monthly income as of the ouse unless you are separated.	date you file this form. If	you have	nothing to rep	ort for	any l	ine, write \$0 in the	e space.	Include your non-	filing
	ou or your non-filing spouse have me space, attach a separate sheet to		ombine th	e information f	or all e	emplo	oyers for that pers	on on the	e lines below. If yo	ou need
							For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sald deductions). If not paid monthly,				2.	\$	4,116.67	\$	2,022.37	
3.	Estimate and list monthly over	time pay.			3.	+\$	0.00	+\$	0.00	

4,116.67

2,022.37

Calculate gross Income. Add line 2 + line 3.

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Debtoi Debtoi			Case	number (<i>if known</i>)			
				Debtor 1		btor 2 or ng spouse	
(Copy line 4 here	. 4.	\$	4,116.67	\$	2,022.37	
5. I	List all payroll deductions:						
į	5a. Tax, Medicare, and Social Security deductions	5a.	\$	1,100.06	\$	333.32	
	5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
Ę	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
5	5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e. Insurance	5e.	\$	0.00	\$	314.56	
	5f. Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g. Union dues	5g.	\$	0.00	\$	0.00	
	5h. Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00	
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,100.06	\$	647.88	
7. (Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,016.61	\$	1,374.49	
\$ \$ \$ \$ \$ \$	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	
9. 1	Add all other income. Add lines 6a+6b+6c+6u+6e+6l+6g+6ll.	9.	Φ	0.00	φ	0.00	
10.	Calculate monthly income. Add line 7 + line 9.	10. \$:	3,016.61 + \$	1,374	.49 = \$	4,391.10
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,-		,
 	State all other regular contributions to the expenses that you list in Schedule Include contributions from an unmarried partner, members of your household, you other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are no Specify:	our depend	-	•		edule J. 11. +\$	0.00
1	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Ceaapplies					· —	4,391.10
I	Do you expect an increase or decrease within the year after you file this for No. ☐ Yes. Explain:	rm?				Combin monthly	ed income

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						•		
Fill	n this informa	tion to identify yo	our case:					
Deb	tor 1	Keith Scott I	Bedford				ck if this is:	
Deb	tor 2 ouse, if filing)	Dawn Marie	Bedford				An amended filing A supplement show 13 expenses as of	wing postpetition chapter the following date:
Unite	ed States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
1	e number nown)							
Of	ficial Fo	rm 106J						
		J: Your	Exper	ISAS				12/15
Be a	as complete a	and accurate as	possible. eded, atta	If two married people ar ch another sheet to this				or supplying correct
Part		ibe Your House	hold					
1.	Is this a joir ☐ No. Go to							
		s Debtor 2 live	in a senar:	ate household?				
	= 103. B00		iii a sepaii	ate nousenoid:				
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
								□ No
_	_							☐ Yes
3.		penses include f people other t	han _	No				
		d your depende		Yes				
Part	2: Estim	ate Your Ongoi	na Monthi	v Fynenses				
Esti exp	imate your ex	penses as of ye	our bankrı	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the following the second sec	orm as a su e J, check th	ipplement in a Cha ne box at the top o	apter 13 case to report f the form and fill in the
the		h assistance an		government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses
•		,						
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgag	e 4. \$	S	708.32
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$	S	0.00
	•	rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		ipkeep expenses		4c. \$		350.00
5.				our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00

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Debtor 1	Keith Scott Bedford			
Debtor 2	Dawn Marie Bedford	Case num	ber (if known)	
1 14:	ities:			
6. Uti 6a.	Electricity, heat, natural gas	6a.	\$	280.00
6b.	Water, sewer, garbage collection	6b.		86.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	279.00
6d.		6d.	\$	0.00
	od and housekeeping supplies	ou.	\$	
	Idcare and children's education costs	7. 8.	\$	775.00 0.00
_	thing, laundry, and dry cleaning	9.	\$	160.00
	sonal care products and services	9. 10.	· : ———	
	•		·	80.00
	dical and dental expenses	11.	Φ	175.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	460.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
	aritable contributions and religious donations	14.		60.00
	urance.	17.	Ψ	00.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15k	. Health insurance	15b.	\$	0.00
150	. Vehicle insurance	15c.	\$	160.00
150	l. Other insurance. Specify:	15d.	\$	0.00
	res. Do not include taxes deducted from your pay or included in lines 4 or 20.		· 	
	ecify:	16.	\$	0.00
	tallment or lease payments:		· -	
	. Car payments for Vehicle 1	17a.	\$	166.00
17b	. Car payments for Vehicle 2	17b.	\$	420.00
170	Other. Specify:	17c.	\$	0.00
	l. Other. Specify:	17d.	\$	0.00
3. Yo	ur payments of alimony, maintenance, and support that you did not report as	 S		
de	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe	ecify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on School			
208	. Mortgages on other property	20a.		0.00
20k	. Real estate taxes	20b.	\$	0.00
200	. Property, homeowner's, or renter's insurance	20c.	\$	0.00
200	l. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
206	Homeowner's association or condominium dues	20e.	\$	0.00
1. Otł	er: Specify:	21.	+\$	0.00
0 0-				
	culate your monthly expenses		•	4.050.00
	Add lines 4 through 21.		\$	4,359.32
	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	4,359.32
3 Ca	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,391.10
	Copy your monthly expenses from line 22c above.	23b.	*	4,359.32
231	. Oopy your monthly expenses from the 220 above.	250.	Ψ	4,309.32
230	. Subtract your monthly expenses from your monthly income.			
200	The result is your monthly net income.	23c.	\$	31.78
	The result to your morning not mounted			
4. Do	you expect an increase or decrease in your expenses within the year after you	ou file this	form?	
For	example, do you expect to finish paying for your car loan within the year or do you expect you			e or decrease because of a
	lification to the terms of your mortgage?			
	No			
	Yes. Explain here:			

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Fill in this infor	mation to identify your	case:		
Debtor 1	Keith Scott Bedfo	ord		
	First Name	Middle Name	Last Name	
Debtor 2	Dawn Marie Bedf			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing
Official Forr	m 106Dec			
Declarat	tion About a	n Individual	Debtor's Schedu	les 12/15
years, or both. 1	8 U.S.C. §§ 152, 1341, 1			to \$250,000, or imprisonment for up to 20
0.9				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankruptcy	forms?
■ No				
☐ Yes. I	Name of person		A	Attach Bankruptcy Petition Preparer's Notice,
	·			Declaration, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed with this	declaration and
X /s/ Kei	th Scott Bedford		X /s/ Dawn Marie Bed	ford
	Scott Bedford		Dawn Marie Bedford	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date	April 14, 2016		Date April 14, 2016	

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Fill in	this inforn	nation to identify you	r case:			
Debtor	r 1	Keith Scott Bedf	ord			
		First Name	Middle Name	Last Name		
Debtor (Spouse		Dawn Marie Bed	ford Middle Name	Last Name		
United	l States Bai	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case r	number _				_	Check if this is an mended filing
State Be as c	ement complete a	nd accurate as possi	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Part 1		,	rital Status and Where You	Lived Before		
ı. w	hat is you	current marital statu	s?			
	Married Not mar	ried				
2. Du	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	l _{No} l Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
D	ebtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	and territori	es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
Part 2	Explai	n the Sources of You	r Income			
Fil	II in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
		in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$12,350.00	■ Wages, commissions, bonuses, tips	\$4,587.93
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 2 Dawn Marie Bedford				Case number (if known)							
			Debtor '	1		Debtor 2					
			Sources	s of income Il that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)			
	or last caler anuary 1 to	idar year: December 31, 2	Wage bonuses	es, commissions, , tips	\$48,600.00	■ Wages, combonuses, tips	nmissions,	\$25,384.70			
			☐ Oper	ating a business		Operating a	business				
		dar year before December 31, 2		es, commissions, , tips	\$46,800.00	■ Wages, combonuses, tips	nmissions,	\$24,932.00			
			☐ Oper	ating a business		☐ Operating a	business				
	List each	,	ross income from e	each source separate	ou received together, list it	that you listed in lir					
			Debtor 1	of income	Gross income from	Debtor 2 Sources of inc	ome	Gross income			
			Describe		each source (before deductions and exclusions)	Describe below		(before deductions and exclusions)			
Pa	rt 3: Lis	t Certain Payme	nts You Made Be	ore You Filed for B	ankruptcy						
S.	Are eithe ☐ No.	Neither Debtor individual prima During the 90 d □ No. Go □ Yes Lis pai	r 1 nor Debtor 2 h arily for a personal, ays before you file to line 7. t below each credit d that creditor. Do	family, or household d for bankruptcy, did or to whom you paid not include payment	mer debts. Consumer debts for purpose." you pay any creditor a total of \$6,425* or more s for domestic support obli	al of \$6,425* or mo	re? /ments and th	ne total amount you			
				to an attorney for this 9 and every 3 years	after that for cases filed or	n or after the date o	f adjustment.				
	Yes.			ve primarily consur d for bankruptcy, did	ner debts. you pay any creditor a tot	al of \$600 or more?	•				
		□ No. Go	to line 7.								
		inc		domestic support ob	a total of \$600 or more ar ligations, such as child sup						
	Creditor	's Name and Ad	dress	Dates of paymen	t Total amount	Amount you still owe	Was this p	ayment for			
	120 E N	r Onized Credi orthpoint r, IL 61364	t Union	Feb, March, Ap Car Payment		\$0.00	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Suppliel ☐ Other_	ard			

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	totor 1 Keith Scott Bedford Dawn Marie Bedford	Boodinent	Cas	se number (if knowi	n)	
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Wells Fargo Home Mortgage PO Box 10394 Des Moines, IA 50306	Feb, March, April Mortgage Payment	\$2,124.96	\$0.00	■ Mortgage □ Car □ Credit Ca □ Loan Rep □ Suppliers □ Other	ard payment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partners or more of their voting	erships of which y g securities; and	ou are a genera any managing a	al partner; corporations gent, including one for
	No					
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	■ No □ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par 9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	tcy, were you a party in ar				
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrups Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, f	oreclosed, garn		d, seized, or levied?
		Explain what happened	d			property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.		luding a bank or fii	nancial institutio	on, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date take	e action was en	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assign	ee for the bene	efit of creditors, a

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Del	btor 2	Dawn Marie Bedford		Case num	ber (if known)	
Pai	rt 5:	List Certain Gifts and Contributions	S			
13.	Withir	n 2 vears before you filed for bankru	iptcv. d	did you give any gifts with a total value of mo	re than \$600 per person	?
	_	No	,,,,	, g		
	□ Y	Yes. Fill in the details for each gift.				
		with a total value of more than \$600 person)	Describe the gifts	Dates you gave the gifts	Value
	Perso Addr	on to Whom You Gave the Gift and ress:				
14.	_		ptcy, c	did you give any gifts or contributions with a	total value of more than	\$600 to any charity?
	_ '	No ∕es. Fill in the details for each gift or co	ntrihuti	ion		
		or contributions to charities that to		Describe what you contributed	Dates you	Value
	more Char	e than \$600 itty's Name Tess (Number, Street, City, State and ZIP Code)		Describe what you contributed	contributed	Value
Pai	rt 6:	List Certain Losses				
15.	or gar	mbling?	otcy or	since you filed for bankruptcy, did you lose a	nything because of the	ft, fire, other disaster
	'	No ∕es. Fill in the details.				
	_		Doscri	be any insurance coverage for the loss	Date of your	Value of property
		the loss occurred	Include	e the amount that insurance has paid. List pendin nce claims on line 33 of Schedule A/B: Property.	loco	lost
Par	rt 7:	List Certain Payments or Transfers				
rai	L / .	List Certain Fayments of Transiers				
16.	consu	ulted about seeking bankruptcy or pi	reparii	d you or anyone else acting on your behalf pang a bankruptcy petition? s, or credit counseling agencies for services requ		rty to anyone you
		No				
	_	Yes. Fill in the details.				
	Perso	on Who Was Paid		Description and value of any property	Date payment	Amount of
	Addr	ess		transferred	or transfer was	payment
		il or website address on Who Made the Payment, if Not Yo	ou		made	
		yon & Scheinbaum, LLC		\$750 (Attorney Fee) + \$335 (Filing Fee)		\$1,085.00
	3077	West Jefferson Street		= \$1,085		, ,
		e 107				
	JOHE	et, IL 60435				
17.	promi		itors o	d you or anyone else acting on your behalf parts to make payments to your creditors? ed on line 16.	ay or transfer any prope	rty to anyone who
		No				
	_ '	Yes. Fill in the details.				
		on Who Was Paid		Description and value of any property	Date payment	Amount of
	Addr			transferred	or transfer was	payment

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Keith Scott Bedford Debtor 1 Debtor 2 **Dawn Marie Bedford**

Case number (if known)

t I i	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial affa ade as security (such as	airs? the granting of a s			
	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made
	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.	d trust or similar device	of which you are a			
	Name of trust	Description and v	alue of the prop	erty trans	ferred	Date Transfer was made
Part	8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Sto	orage Unit	s	
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your beneficial, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 						, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Do you now have, or did you have within 1 ycash, or other valuables?	year before you filed for	bankruptcy, an	y safe dep	oosit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents		Do you still have it?
22. l	Have you stored property in a storage unit o	or place other than your	home within 1	year befor	e you filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe 1	the contents	Do you still have it?
Part	9: Identify Property You Hold or Control	for Someone Else				
	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any propert	y you borr	owed from, are storing t	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe 1	the property	Value
	10: Give Details About Environmental Info					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Keith Scott Bedford
Debtor 2 Dawn Marie Bedford

Case number (if known)

	regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	ort a	II notices, releases, and proceedings th	nat yo	ou know about, regardless of when	the	y occurred.		
24.	Has	any governmental unit notified you tha	at you	ı may be liable or potentially liable	und	er or in violation of an environm	ental law?	
		No						
	Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice	
25. Have you notified any governmental unit of any release of hazardous material?								
	■ No							
	Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice	
26.	Hav	e you been a party in any judicial or adı	minis	strative proceeding under any envir	onn	nental law? Include settlements	and orders.	
	_	No						
		No Yes. Fill in the details.						
		se Title		Court or agency	Nat	ure of the case	Status of the	
	Cas	se Number		Name Address (Number, Street, City, State and ZIP Code)			case	
Pai	rt 11:	Give Details About Your Business or	Con	nections to Any Business				
27.	With	nin 4 years before you filed for bankrup	otcv. c	did you own a business or have any	v of	the following connections to any	/ business?	
		☐ A sole proprietor or self-employed	•	•				
		☐ A member of a limited liability comp	pany	(LLC) or limited liability partnership	p (L	LP)		
		☐ A partner in a partnership						
		☐ An officer, director, or managing ex	xecut	ive of a corporation				
	 □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. 							
	_	Yes. Check all that apply above and fil						
		siness Name		scribe the nature of the business	•	Employer Identification numbe	•	
	Add	dress nber, Street, City, State and ZIP Code)		me of accountant or bookkeeper		Do not include Social Security		
	(INA	me of accountant of bookkeeper		Dates business existed		
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	otcy, o	did you give a financial statement to	o an	yone about your business? Incl	ude all financial	
		No						
		Yes. Fill in the details below.						
	Nai		Da	te Issued				
		dress nber, Street, City, State and ZIP Code)						

Part 12: Sign Below

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Keith Scott Bedford Debtor 1 Debtor 2 **Dawn Marie Bedford** Case number (if known) are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Keith Scott Bedford /s/ Dawn Marie Bedford **Keith Scott Bedford Dawn Marie Bedford** Signature of Debtor 1 Signature of Debtor 2 Date April 14, 2016 Date April 14, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:		
Debtor 1	Keith Scott Bedfo	ord		
	First Name	Middle Name	Last Name	
Debtor 2	Dawn Marie Bedf	ord		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
☐ Surrender the property.	□ No
Retain the property and redeem it.	_
☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
Retain the property and [explain]: Retain and Pay	
☐ Surrender the property.	□ No
Retain the property and enter into a Reaffirmation Agreement.	■ Yes
Retain the property and [explain]: Retain and Pay	
☐ Surrender the property.	□ No
☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	■ Yes
	Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: Retain and Pay ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: Retain and Pay ☐ Surrender the property and redeem it. ☐ Retain the property and redeem it. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement.

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	Keith Scott Bedford Dawn Marie Bedford	Case number	「 (if known)	
securing debt:		Honor mortgage and discharge no	ote	
For any unin the info	Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).			
Describe your unexpired personal property leases			Will the lease be assumed?	
	on of leased		□ No	
Property:			☐ Yes	
Lessor's r	name: on of leased		□ No	
Property:			☐ Yes	
Lessor's r			□ No	
Property:	on of leased		☐ Yes	
Lessor's r			□ No	
Description Property:	on of leased		☐ Yes	
Lessor's name:			□ No	
Description Property:	on of leased		☐ Yes	
Lessor's name: Description of leased Property:			□ No	
			☐ Yes	
Lessor's name: Description of leased Property:			□ No	
			☐ Yes	
Part 3:	Sign Below			
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.				
X /s/ k	Keith Scott Bedford	X /s/ Dawn Marie Bedfore	d	
Keit	th Scott Bedford	Dawn Marie Bedford		
Sign	nature of Debtor 1	Signature of Debtor 2		

Date

Date

April 14, 2016

April 14, 2016

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-12818 Doc 1 Filed 04/14/16 Entered 04/14/16 21:06:49 Desc Main Document Page 54 of 58

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

	Keith Scott Bedford		G. N	
In re	Dawn Marie Bedford	Debtor(s)	Case No. Chapter	7
		Decitor(s)	Chapter	·
	DISCLOSURE OF COMPE	NSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendebe rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:			
	For legal services, I have agreed to accept		<u> </u>	750.00
	Prior to the filing of this statement I have received			750.00
	Balance Due			0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspect	s of the bankruptcy c	ase, including:
l	a. Analysis of the debtor's financial situation, and rendebt. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of credited. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on home.	ement of affairs and plan which ors and confirmation hearing, ar reduce to market value; exe ons as needed; preparation	may be required; d any adjourned hear	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any ad		service:	
		CERTIFICATION		
	I certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Α	pril 14, 2016	/s/ Christina Bany	on .	
D	Date (Christina Banyon		
		Signature of Attorne Banyon & Schein		
		3077 West Jeffers		
		Suite 107 Joliet, IL 60435		
		cbanyon.law@gn	nail com	
		Name of law firm	iaii.coiii	

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United States Bankruptcy Court Northern District of Illinois

In re	Keith Scott Bedford Dawn Marie Bedford		Case No.		
		Debtor(s)	Chapter	7	
	VERIFICATION OF CREDITOR MATRIX				
		Number of C	Number of Creditors: 33		
	The above-named Debtor(s) he (our) knowledge.	ove-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my nowledge.			
Date:	April 14, 2016	/s/ Keith Scott Bedford Keith Scott Bedford			
		Signature of Debtor			
Date:	April 14, 2016	/s/ Dawn Marie Bedford			
		Dawn Marie Bedford			
		Signature of Debtor			

AFNI, Inc. PO Box 3510 Bloomington, IL 61702

AFNI, Inc. PO Box 3517 Bloomington, IL 61702

Arturo Tomas PO Box 732 Ottawa, IL 61350

Capital One PO Box 6492 Carol Stream, IL 60197

Capital One Retail Services PO Box 71106 Charlotte, NC 28272

Convergent Healthcare PO Box 5435 Dept 102 Carol Stream, IL 60197

CubCadet P.O. Box 368022 Strongsville, OH 44136

Dr. David McFadden
1401 Lakewood Dr.
D
Morris, IL 60450

EOS CCA PO Box 981002 Boston, MA 02298

Epic Group PO Box 88087 Chicago, IL 60680

Ford Service Card PO Box 9001006 Louisville, KY 40290 Grundy Radiologists PO Box 3273 Indianapolis, IN 46206

Healthcare Centers of Morris Hospit 25259 Reed Street Channahon, IL 60410

Healthcare Midwest 5405 N. Knoxville Peoria, IL 61614

Heights Finance Corp. 1128 Columbus Street Ottawa, IL 61350

Kohls PO Box 3115 Milwaukee, WI 53201

Liberty Medical Center 827 E. Norris Dr. Ottawa, IL 61350

Mega Group/Synchrony PO Box 105972 Atlanta, GA 30348

Morris Hospital 150 West High Street Morris, IL 60450

Morris Hospital Business Office 150 West High Street Morris, IL 60450

One Main Financial PO Box 183172 Columbus, OH 43218

OSF Healthcare 7978 Solution Center Chicago, IL 60677 OSF Healthcare System 7978 Solution Center Chicago, IL 60677

OSF Medical Group PO Box 91011 Chicago, IL 60680

Streator Onized Credit Union 120 E. Northpoint Streator, IL 61364

Synchrony Bank P.O. Box 105972 Atlanta, GA 30348

T-H Professional Collections PO Box 10166 Peoria, IL 61612

Tower Loans 7501 N. University St. Suite 101 Peoria, IL 61614

Transworld Systems PO Box 17205 Wilmington, DE 19850

Walmart / Synchrony Bank PO Box 530927 Atlanta, GA 30353

Walmart Master Card PO Box 960024 Orlando, FL 32896

Wells Fargo Home Mortgage PO Box 10335 Des Moines, IA 50306

Zales PO Box 9001006 Louisville, KY 40290